UNITED STATES PATENT & TRADEMAPS OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: (0) 7/05 2 Serial/Patent # 10/5775706				
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
Filing			\$	
Amendment	·		\$	
Extension of Time			\$	
Notice of Appeal/Appeal			\$	
Petition			\$	
Issue		,	\$	
Cert of Correction/Terminal Disc.			\$	
Maintenance			\$	
Assignment			\$	
Other Search per adjustment			\$ 100	
	7 TOTAL AMOUNT S /OO			
	8 TO BE REFUNDED BY:			
10 REASON:	Treasury Check			
Overpayment	Credit Deposit A/C #:			
Duplicate Payment	9 _	, [3] /030		
No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: Kaya Lowin (Baltimore) TITLE: Paraligal				
signature: Phone: (703)388-9140				
office: Do to Eur 202				
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED:	DATE: _			

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B